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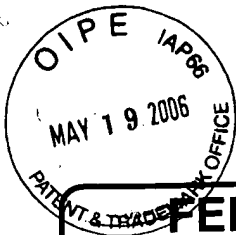
2675 \$

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/714,320
		Filing Date	November 15, 2000
		First Named Inventor	Matias Duarte
		Art Unit	2675
		Examiner Name	Srilakshmi K. Kumar
Total Number of Pages in This Submission	20	Attorney Docket Number	4676P004X

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input checked="" type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">2 Foreign patents. Return postcard.</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Thomas C. Webster, Reg. No. 46,154 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	

CERTIFICATE OF MAILING/TRANSMISSION			
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Carla Vignola	Date	5-16-06
Signature			



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 1,320.00

Complete if Known

Application Number 09/714,320
Filing Date November 15, 2000
First Named Inventor Matias Duarte
Examiner Name Srilakshmi K. Kumar
Art Unit 2675
Attorney Docket No. 4676P004X

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify):
☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) ☒ Credit any overpayments
under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
17	32*	0	\$0.00
Independent Claims	3	4*	0
Multiple Dependent			
Large Entity	Small Entity		
Fee Code	Fee Code	Fee (\$)	Fee Description
1202 50	2202 25		Claims in excess of 20
1201 200	2201 100		Independent claims in excess of 3
1203 360	2203 180		Multiple Dependent claim, if not paid
1204 790	2204 395		**Reissue independent claims over original patent
1205 300	2205 150		**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)	0.00

*or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051 130		2051 65		Surcharge - late filing fee or oath	
1052 50		2052 25		Surcharge - late provisional filing fee or cover sheet.	
2053 130		2053 130		Non-English specification	
1251 120		2251 60		Extension for reply within first month	
1252 450		2252 225		Extension for reply within second month	
1253 1,020		2253 510		Extension for reply within third month	1,020.00
1254 1,590		2254 795		Extension for reply within fourth month	
1255 2,160		2255 1,080		Extension for reply within fifth month	
1401 500		2401 250		Notice of Appeal	
1402 500		2402 250		Filing a brief in support of an appeal	
1403 1,000		2403 500		Request for oral hearing	
1451 1,510		2451 1,510		Petition to institute a public use proceeding	
1460 130		2460 130		Petitions to the Commissioner	
1807 50		1807 50		Processing fee under 37 CFR 1.17(q)	180.00
1806 180		1806 180		Submission of Information Disclosure Stmt	
1809 790		1809 395		Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 790		2810 395		For each additional invention to be examined (37 CFR § 1.129(b))	120.00
Other fee (specify)		Statutory Disclaimer			
SUBTOTAL (2)		(\$)			1,320.00

SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Thomas C. Webster Registration No. (Attorney/Agent) 46,154 Telephone (408) 720-8300
Signature Date 5/16/06